

LIST OF GRANTEES (6 Grantees)					
Grantee Name	City	State	Tracking Number	BHCMIS ID	Funding Streams
CITY OF SIOUX FALLS HEALTH DEPARTMENT	SIOUX FALLS	SD	H80CS002192009	081450	CH,HCH
COMMUNITY HEALTH CENTER OF BLACK HILLS, INC.	RAPID CITY	SD	H80CS002162009	081890	CH,HCH
HORIZON HEALTH CARE, INC.	HOWARD	SD	H80CS001352009	081030	CH
PRAIRIE COMMUNITY HEALTH, INC.	ISABEL	SD	H80CS003492009	082100	CH
RURAL HEALTH CARE, INC.	FORT PIERRE	SD	H80CS004562009	080590	CH
UNION COUNTY HEALTH FNDN., INC.	ELK POINT	SD	H80CS005342009	080890	CH

TABLE 3A - Patients by Age and Gender - 2009
State - Universal - 6 Grantees

Age Groups		Male Patients (a)	Female Patients (b)	All Patients
Number of Patients				
1.	Under Age 1	827	748	1,575
2.	Age 1	666	616	1,282
3.	Age 2	615	582	1,197
4.	Age 3	616	589	1,205
5.	Age 4	641	635	1,276
6.	Age 5	625	544	1,169
7.	Age 6	598	584	1,182
8.	Age 7	563	505	1,068
9.	Age 8	491	474	965
10.	Age 9	487	488	975
11.	Age 10	496	485	981
12.	Age 11	496	450	946
13.	Age 12	456	449	905
14.	Age 13	434	438	872
15.	Age 14	440	485	925
16.	Age 15	462	521	983
17.	Age 16	458	610	1,068
18.	Age 17	476	572	1,048
19.	Age 18	406	624	1,030
20.	Age 19	348	576	924
Subtotal Patients (sum lines 1-20)		10,601	10,975	21,576
21.	Age 20	342	662	1,004
22.	Age 21	348	673	1,021
23.	Age 22	321	650	971
24.	Age 23	325	592	917
25.	Age 24	383	650	1,033
26.	Ages 25 - 29	1,887	2,676	4,563
27.	Ages 30 - 34	1,626	2,193	3,819
28.	Ages 35 - 39	1,353	1,843	3,196
29.	Ages 40 - 44	1,446	1,816	3,262
30.	Ages 45 - 49	1,733	2,044	3,777
31.	Ages 50 - 54	1,649	1,817	3,466
32.	Ages 55 - 59	1,407	1,497	2,904
33.	Ages 60 - 64	1,030	1,142	2,172
Subtotal Patients (sum lines 21-33)		13,850	18,255	32,105
34.	Ages 65 - 69	708	829	1,537
35.	Ages 70 - 74	563	659	1,222
36.	Ages 75 - 79	468	619	1,087
37.	Ages 80 - 84	402	564	966
38.	Ages 85 and over	353	634	987
Subtotal Patients (sum lines 34-38)		2,494	3,305	5,799
39.	Total Patients (sum lines 1-38)	26,945	32,535	59,480
% of Total		45.3%	54.7%	

TABLE 3B - Patients by Hispanic or Latino Identity / Race / Language - 2009
State - Universal - 6 Grantees

PATIENTS BY RACE		PATIENTS BY HISPANIC OR LATINO IDENTITY						
		Hispanic/Latino (a)	Non-Hispanic/Latino (b)	Unreported/Refused to Report (c)		Total (d)		
				Number	% of Total	Number	% of Total	% of Known
Number of Patients								
1.	Asian	2	841			843	1.4%	1.4%
2a.	Native Hawaiian	0	15			15	0.0%	0.0%
2b.	Other Pacific Islander	33	39			72	0.1%	0.1%
2.	Total Hawaiian/Pacific Islander (Sum lines 2a+2b)	33	54			87	0.1%	0.1%
3.	Black/African American	16	2,964			2,980	5.0%	5.1%
4.	American Indian/Alaska native	39	10,087			10,126	17.0%	17.4%
5.	White	1,048	42,245			43,293	72.8%	74.2%
6.	More than one race	489	521			1,010	1.7%	1.7%
6a.	Total Known (Sum lines 1+2+3+4+5+6)	1,627	56,712			58,339		
7.	Unreported/Refused to report	353	572	216	0.4%	1,141	1.9%	
8.	Total Patients(Sum lines 1+2+3 to 7)	1,980	57,284	216	0.4%	59,480	100.0%	100.0%
		% of Known (a)	% of Known (b)					
9.	Total Patients	3.3%	96.7%					

PATIENTS BY LANGUAGE	Number (a)	% of Total
Number of Patients		
12. Patients best served in a language other than English	2,589	4.4%

% may not equal 100% due to rounding

TABLE 4 - Selected Patient Characteristics - 2009
State - Universal - 6 Grantees

Characteristic		Number of Patients (a)	% of Total	% of Known		
Income as Percent of Poverty Level						
1.	100% and Below	22,107	37.2%	46.4%		
2.	101 - 150%	10,326	17.4%	21.7%		
3.	151 - 200%	6,877	11.6%	14.4%		
4.	Over 200%	8,304	14.0%	17.4%		
5.	Unknown	11,866	19.9%			
6.	Total (sum lines 1-5)	59,480	100.0%			
Principal Third Party Medical Insurance Source		Ages 0 - 19 (a)	Ages 20+ (b)	TOTAL	%	
7.	None/Uninsured	5,159	19,475	24,634	41.4%	
8a.	Regular Medicaid (Title XIX)	6,767	4,088	10,855	18.2%	
8b.	CHIP Medicaid	4,050	60	4,110	6.9%	
8.	Total Medicaid (Sum lines 8a+8b)	10,817	4,148	14,965	25.2%	
9.	Medicare (Title XVIII)	4	6,292	6,296	10.6%	
10a.	Other Public Insurance Non-CHIP	0	0	0	0.0%	
10b.	Other Public Insurance CHIP	0	0	0	0.0%	
10.	Total Public Insurance (Sum lines 10a+ 10b)	0	0	0	0.0%	
11.	Private Insurance	5,596	7,989	13,585	22.8%	
12.	Total (Sum Lines 7+8+9+10+11)	21,576	37,904	59,480	100.0%	
Managed Care Utilization						
Payor Category		Medicaid (a)	Medicare (b)	Other Public Including Non- Medicaid CHIP (c)	Private (d)	Total (e)
13a. Capitated Member months		0	0	0	0	0
13b. Fee-for-service Member months		0	0	0	0	0
13c. Total Member Months (Sum lines 13a+ 13b)		0	0	0	0	0
Characteristics - Special Populations			Number of Patients (a)	%		
14. Migrant (330g grantees Only)			0	0.0%		
15. Seasonal (330g grantees Only)			0	0.0%		
Migrant/Seasonal (non-330 g grantees)			95	100.0%		
16. Total Migrant/Seasonal Agricultural Worker or Dependent (All Grantees Report This Line)			95	100.0%		
17. Homeless Shelter (330h grantees Only)			725	38.0%		
18. Transitional (330h grantees Only)			309	16.2%		
19. Doubling Up (330h grantees Only)			505	26.5%		
20. Street (330h grantees Only)			44	2.3%		
21. Other (330h grantees Only)			272	14.2%		
22. Unknown (330h grantees Only)			54	2.8%		
Homeless (non-330 h grantees)			0	0.0%		
23. Total Homeless (All Grantees Report This Line)			1,909	100.0%		
24. Total School Based Health Center Patients (All Grantees Report This Line)			2,398			
25. Total Veterans (All Grantees Report this Line)			977			

% may not equal 100% due to rounding

TABLE 5 - Staffing and Utilization - 2009
State - Universal - 6 Grantees

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs (a)	Clinic Visits (b)	Patients (c)
1.	Family Physicians	10.61	44,448	
2.	General Practitioners	0.77	1,978	
3.	Internists	3.01	9,369	
4.	Obstetrician/Gynecologists	0.07	120	
5.	Pediatricians	1.31	5,399	
7.	Other Specialty Physicians	0.07	398	
8.	Total Physicians (Sum lines 1-7)	15.84	61,712	
9a.	Nurse Practitioners	12.21	39,038	
9b.	Physician Assistants	22.52	46,175	
10.	Certified Nurse Midwives	0.00	0	
10a.	Total Mid-Levels (Sum lines 9a-10)	34.73	85,213	
11.	Nurses	51.77	42,072	
12.	Other Medical Personnel	20.93		
13.	Laboratory Personnel	5.98		
14.	X-Ray Personnel	1.76		
15.	Total Medical Services (Sum lines 8+10a through 14)	131.01	188,997	53,051
16.	Dentists	8.88	20,732	
17.	Dental Hygienists	4.35	5,083	
18.	Dental Assistants, Aides, Techs	20.49		
19.	Total Dental Services (Sum lines 16-18)	33.72	25,815	10,485
20a.	Psychiatrists	0.10	412	
20a1.	Licensed Clinical Psychologists	0.00	0	
20a2.	Licensed Clinical Social Workers	0.00	0	
20b.	Other Licensed Mental Health Providers	0.78	596	
20c.	Other Mental Health Staff	0.50	224	
20.	Total Mental Health Services (Sum lines 20a-20c)	1.38	1,232	350
21.	Substance Abuse Services	0.00	1	1
22.	Other Professional Services	0.00	0	0
23.	Pharmacy Personnel	2.93		
24.	Case Managers	6.13	5,227	
25.	Patient/Community Education Specialists	1.85	132	
26.	Outreach Workers	4.83		
27.	Transportation Staff	0.23		
27a.	Eligibility Assistance Workers	4.03		
27b.	Interpretation Staff	0.10		
28.	Other Enabling Services	0.00		
29.	Total Enabling Services (Sum lines 24-28)	17.17	5,359	2,399
29a.	Other Programs/Services	6.59		
30a.	Management and Support Staff	22.96		
30b.	Fiscal and Billing Staff	29.83		
30c.	IT Staff	3.41		
30.	Total Administrative Staff (Sum lines 30a-30c)	56.20		
31.	Facility Staff	6.21		
32.	Patient Support Staff	59.03		
33.	Total Administrative & Facility (Sum lines 30-32)	121.44		
34.	Total (Sum lines 15+19+20+21+22+23+29+29a+33)	314.24	221,404	

Visits are shown only for personnel that generate reportable visits
Subtotals may differ from the sum of cells due to rounding

TABLE 5 - Staffing and Utilization - 2009
State - Universal - 6 Grantees

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs		Visits	
		% Group	% Total	% Group	% Total
1.	Family Physicians	8.1%	3.4%	23.5%	20.1%
2.	General Practitioners	0.6%	0.2%	1.0%	0.9%
3.	Internists	2.3%	1.0%	5.0%	4.2%
4.	Obstetrician/Gynecologists	0.1%	0.0%	0.1%	0.1%
5.	Pediatricians	1.0%	0.4%	2.9%	2.4%
7.	Other Specialty Physicians	0.1%	0.0%	0.2%	0.2%
8.	Total Physicians (Sum lines 1-7)	12.1%	5.0%	32.7%	27.9%
9a.	Nurse Practitioners	9.3%	3.9%	20.7%	17.6%
9b.	Physician Assistants	17.2%	7.2%	24.4%	20.9%
10.	Certified Nurse Midwives	0.0%	0.0%	0.0%	0.0%
10a.	Total Mid-Levels (Sum lines 9a-10)	26.5%	11.1%	45.1%	38.5%
11.	Nurses	39.5%	16.5%	22.3%	19.0%
12.	Other Medical Personnel	16.0%	6.7%		
13.	Laboratory Personnel	4.6%	1.9%		
14.	X-Ray Personnel	1.3%	0.6%		
15.	Total Medical (Sum lines 8+10a through 14)	100.0%	41.7%	100.0%	85.4%
16.	Dentists	26.3%	2.8%	80.3%	9.4%
17.	Dental Hygienists	12.9%	1.4%	19.7%	2.3%
18.	Dental Assistance,Aides,Techs	60.8%	6.5%		
19.	Total Dental Services (Sum lines 16-18)	100.0%	10.7%	100.0%	11.7%
20a.	Psychiatrists	7.2%	0.0%	33.4%	0.2%
20a1.	Licensed Clinical Psychologists	0.0%	0.0%	0.0%	0.0%
20a2.	Licensed Clinical Social Workers	0.0%	0.0%	0.0%	0.0%
20b.	Other Licensed Mental Health Providers	56.5%	0.2%	48.4%	0.3%
20c.	Other Mental Health Staff	36.2%	0.2%	18.2%	0.1%
20.	Mental Health (Sum lines 20a-c)	100.0%	0.4%	100.0%	0.6%
21.	Substance Abuse Services	-	0.0%	100.0%	0.0%
22.	Other Professional Services	-	0.0%	-	0.0%
23.	Pharmacy Personnel	100.0%	0.9%		
24.	Case Managers	35.7%	2.0%	97.5%	2.4%
25.	Patient/Community Education Specialists	10.8%	0.6%	2.5%	0.1%
26.	Outreach Workers	28.1%	1.5%		
27.	Transportation Staff	1.3%	0.1%		
27a.	Eligibility Assistance Workers	23.5%	1.3%		
27b.	Interpretation Staff	0.6%	0.0%		
28.	Other Enabling Services	0.0%	0.0%		
29.	Total Enabling Services (Sum lines 24-28)	100.0%	5.5%	100.0%	2.4%
29a.	Other Programs/Services	100.0%	2.1%		

Clinic visits are shown only for personnel that generate reportable visits
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% may not equal 100% due to rounding

TABLE 5 - Staffing and Utilization - 2009
State - Universal - 6 Grantees

PERSONNEL BY MAJOR SERVICE CATEGORY		FTEs		Visits	
		% Group	% Total	% Group	% Total
30a.	Management and Support Staff	18.9%	7.3%		
30b.	Fiscal and Billing Staff	24.6%	9.5%		
30c.	IT Staff	2.8%	1.1%		
30.	Total Administrative Staff (Sum lines 30a-30c)	46.3%	17.9%		
31.	Facility Staff	5.1%	2.0%		
32.	Patient Support Staff	48.6%	18.8%		
33.	Total Administrative & Facility (Sum lines 30-32)	100.0%	38.6%		
34.	Total (Sum lines 15+19+20+21+22+23+29+29a+33)		100.0%		100.0%

Clinic Visits are shown only for personnel that generate reportable visits
Subtotals may differ from the sum of cells due to rounding
% may not equal 100% due to rounding

TABLE 6A - Selected Diagnoses and Services Rendered - 2009
State - Universal - 6 Grantees

Diagnostic Category		Applicable ICD - 9 - CM Codes	Number of Visits by Primary Diagnosis (a)	Number of Patients with Primary Diagnosis (b)	Visits Per Patient
Selected Infectious and Parasitic Diseases					
1.	Symptomatic HIV	042; 079.53	115	51	2.25
2.	Asymptomatic HIV	V08	110	55	2.00
3.	Tuberculosis	010.xx - 018.xx	4	4	1.00
4.	Syphilis and other sexually transmitted diseases	090.xx - 099.xx	74	68	1.09
Selected Diseases of the Respiratory System					
5.	Asthma	493.xx	1,586	1,209	1.31
6.	Chronic bronchitis and Emphysema	490.xx - 492.xx	1,438	983	1.46
Selected Other Medical Conditions					
7.	Abnormal Breast Findings,Female	174.xx; 198.81; 233.0x; 238.3; 793.8x	83	34	2.44
8.	Abnormal Cervical Findings	180.xx; 198.82; 233.1x; 795.0x	259	216	1.20
9.	Diabetes Mellitus	250.xx; 648.0x; 775.1x;	4,975	2,230	2.23
10.	Heart Disease (selected)	391.xx - 392.0x 410.xx - 429.xx	2,454	1,017	2.41
11.	Hypertension	401.xx - 405.xx;	7,931	4,045	1.96
12.	Contact Dermatitis and other Eczema	692.xx	1,180	975	1.21
13.	Dehydration	276.5x	135	69	1.96
14.	Exposure to Heat or Cold	991.xx - 992.xx	24	16	1.50
14a.	Overweight and obesity	ICD-9 : 278.0 – 278.02 or V85.xx (Excluding V85.0, V85.1, V85.51 V85.52)	491	255	1.93
Selected Childhood Conditions					
15.	Otitis Media and Eustachian Tube Disorders	381.xx - 382.xx	4,784	3,530	1.36
16.	Selected Perinatal Medical Conditions	770.xx; 771.xx; 773.xx; 774.xx - 779.xx (Excluding 779.3x)	210	139	1.51
17.	Lack of Expected Normal Physiological Development (Such as delayed milestone;Failure to gain weight;Failure to thrive)-does not include sexual or mental development;Nutritional Deficiencies	260.xx - 269.xx; 779.3x; 783.3x - 783.4x;	283	124	2.28

TABLE 6A - Selected Diagnoses and Services Rendered - 2009
State - Universal - 6 Grantees

Diagnostic Category		Applicable ICD - 9 - CM Codes	Number of Visits by Primary Diagnosis (a)	Number of Patients with Primary Diagnosis (b)	Visits Per Patient
Selected Mental Health and Substance Abuse Conditions					
18.	Alcohol Related Disorders	291.xx; 303.xx; 305.0x; 357.5x	232	160	1.45
19.	Other Substance Related Disorders (Excludes Tobacco Use Disorders)	292.1x - 292.8x; 304.xx; 305.2x - 305.9x; 357.6x; 648.3x	89	58	1.53
19a.	Tobacco Use Disorders	305.1	169	164	1.03
20a.	Depression and Other Mood Disorders	296.xx; 300.4 301.13; 311.xx	3,928	2,205	1.78
20b.	Anxiety Disorders Including PTSD	300.0x; 300.2x; 300.3; 308.3; 309.81;	1,409	813	1.73
20c.	Attention Deficit and Disruptive Behavior Disorders	312.8x; 312.9x; 313.81; 314.xx	1,129	547	2.06
20d.	Other Mental Disorders, Excluding Drug or Alcohol Dependence (includes mental retardation)	290.xx; 293.xx - 302.xx (Excluding 296.xx; 300.0x; 300.2x; 300.3; 300.4; 301.13); 306.xx - 319.xx (Excluding 308.3; 309.81; 311.xx; 312.8x; 312.9x; 313.81; 314.xx)	941	599	1.57

TABLE 6A - Selected Diagnoses and Services Rendered - 2009
State - Universal - 6 Grantees

Service Category		Applicable ICD - 9 - CM Codes	Number of Visits (a)	Number of Patients (b)	Visits Per Patient
Selected Diagnostic Tests/Screening/Preventive Services					
21.	HIV Test	CPT - 4: 86689; 86701 - 86703; 87390 - 87391	1,451	1,411	1.03
22.	Mammogram	CPT-4: 77052, 77057 OR ICD-9: V76.11; V76.12	548	548	1.00
23.	Pap Test	CPT - 4: 88141 - 88155; 88164 - 88167; 88174 - 88175 OR ICD - 9: V72.3; V72.31; V76.2	3,634	3,467	1.05
24.	Selected Immunizations (Hepatitis A, Hemophilus Influenza B (HiB), Influenza virus, Pneumococcal Diptheria, Tetanus, Pertussis (DTaP) (DTP) (DT), Mumps, Measles, Rubella, Poliovirus, Varicella, Hepatitis B Child)	CPT - 4: 90633 - 90634, 90645 - 90648; 90669; 90696 - 90702; 90704 - 90716; 90718 - 90723; 90743 - 90744; 90748	16,471	13,493	1.22
24a.	Seasonal Flu Vaccine	CPT-4: 90655 - 90662	11,421	10,986	1.04
24b.	H1N1 Flu Vaccine	CPT-4: 90663; 90470	5,151	4,853	1.06
25.	Contraceptive Management	ICD - 9: V25.xx CPT - 4: 99391 - 99393;	4,633	2,386	1.94
26.	Health Supervision of Infant or Child (ages 0 through 11)	99381 - 99383;	6,356	4,582	1.39
26a.	Childhood lead test screening (Ages 9 to 72 months)	CPT-4: 83655	721	686	1.05
26b.	Screening, Brief Intervention, and Referral to Treatment (SBIRT)	CPT-4: 99408-99409	31	31	1.00
26c.	Smoke and tobacco use cessation counseling	CPT-4: 99406 and 99407; S9075	4,227	982	4.30

TABLE 6A - Selected Diagnoses and Services Rendered - 2009
State - Universal - 6 Grantees

Service Category		Applicable ADA Code	Number of Visits (a)	Number of Patients (b)	Visits Per Patient
Selected Dental Services					
27.	I. Emergency Services	ADA: D9110	1,536	1,243	1.24
28.	II. Oral Exams	ADA: D0120, D0140, D0145, D0150, D0160, D0170, D0180	10,060	7,919	1.27
29.	Prophylaxis - Adult or Child	ADA: D1110, D1120	5,459	4,578	1.19
30.	Sealants	ADA: D1351	785	395	1.99
31.	Fluoride Treatment - adult or child	ADA: D1203, D1204, D1206	3,819	3,049	1.25
32.	III. Restorative Services	ADA: D21xx - D29xx	7,911	3,431	2.31
33.	IV. Oral Surgery (Extractions and other Surgical Procedures)	ADA: D7111, D7140, D7210, D7220, D7230, D7240, D7241, D7250, D7260, D7261, D7270, D7272, D7280	4,396	2,935	1.50
34.	V. Rehabilitation Services (Endo,Perio,Prosthodontics,Orthodontics)	ADA: D3xxx, D4xxx, D5xxx, D6xxx, D8xxx	2,203	1,464	1.50

TABLE 6B - Quality of Care Indicators - 2009
State - Universal - 6 Grantees

SECTION A - AGE CATEGORIES FOR PRENATAL PATIENTS (GRANTEES WHO PROVIDE PRENATAL CARE ONLY)						
DEMOGRAPHIC CHARACTERISTICS OF PRENATAL CARE PATIENTS						
AGE		Number of Patients (a)		Percent		
1.	Less than 15 Years	1		0.3%		
2.	Ages 15 - 19	57		15.8%		
3.	Ages 20 - 24	136		37.8%		
4.	Ages 25 - 44	165		45.8%		
5.	Ages 45 and Over	1		0.3%		
6.	Total Patients (Sum lines 1-5)		360	100.0%		
SECTION B - TRIMESTER OF ENTRY INTO PRENATAL CARE						
Trimester of First Known Visit for Women Receiving Prenatal Care During Reporting Year		Women Having First Visit with Grantee		Women Having First Visit with Another Provider		% Total
		(a)	%	(b)	%	
7.	First Trimester	158	43.9%	24	6.7%	50.6%
8.	Second Trimester	109	30.3%	11	3.1%	33.3%
9.	Third Trimester	57	15.8%	1	0.3%	16.1%
SECTION C - CHILDHOOD IMMUNIZATION RATE						
Childhood Immunization Rate		Total Number Patients with 2nd Birthday During Measurement Year (a)	Estimated number patients immunized (b)	Estimated % patients immunized (c)		
10.	Number of children who have received required vaccines who had their 2nd birthday during measurement year	1,040	866	83.2%		
SECTION D - PAP TEST						
Pap Test		Total Number of Female Patients 24-64 Years of Age (a)	Estimated number patients tested (b)	Estimated % patients tested (c)		
11.	Number of female patients aged 24-64 who had at least one PAP test performed during the measurement year or during one of the previous two years	13,217	6,309	47.7%		

% may not equal 100% due to rounding

The childhood immunization and Pap test rates are based on the total of the estimated number of patients tested or immunized for each health center divided by the total number patients in the applicable category (i.e., the universe) for each measure.

TABLE 7 - Health Outcomes and Disparities - 2009
State - Universal - 6 Grantees

Total (i)								
HIV Positive Pregnant Women	2							
	100.0%							
Section A: DELIVERIES AND BIRTH WEIGHT								
	Prenatal care patients who delivered during the year		Deliveries performed by Grantee Provider		Live Births < 1500 grams	Live Births 1500-2499 grams	Live Births >= 2500 grams	% Low and Very Low Birth Weight
By Race								
Asian (a)	1	0.4%			0	0	1	0.0%
Native Hawaiian (b1)	0	0.0%			0	0	0	-
Pacific Islander (b2)	0	0.0%			0	0	0	-
Black/ African American (c)	2	0.7%			0	0	2	0.0%
American Indian/ Alaska Native (d)	187	69.8%			3	3	183	3.2%
White (e)	43	16.0%			0	2	40	4.8%
More than one race (f)	2	0.7%			0	0	2	0.0%
Race Unreported/ Refused to Report (g)	33	12.3%			5	2	26	21.2%
Sub-total (Sum a+b1+b2+c+d+e+f+g)	268	100.0%			8	7	254	5.6%
By Hispanic/Latino Identity								
Hispanic/Latino (c1)	42	15.7%			5	2	35	16.7%
Non-Hispanic/Latino (c2)	226	84.3%			3	5	219	3.5%
Sub-total (Sum c1 + c2)	268	100.0%			8	7	254	5.6%
Unreported / Refused to Report Race and Ethnicity (h)	0	0.0%			0	0	0	-
Total (i)	268	100.0%	1	100.0%	8	7	254	5.6%

* % shown are rounded to the .1% level for table display purposes; calculations are made using % to 8 decimal places

TABLE 7 - Health Outcomes and Disparities - 2009
State - Universal - 6 Grantees

SECTION B: HYPERTENSION		
Patients 18 to 85 diagnosed with hypertension whose last blood pressure was less than 140/90		
	Total hypertensive patients	Estimated % Patients with Controlled Blood Pressure
By Race		
Asian (a)	25	
Native Hawaiian (b1)	0	
Pacific Islander (b2)	6	
Black/ African American (c)	142	
American Indian/ Alaska Native (d)	434	
White (e)	4,984	
More than one race (f)	42	
Race Unreported/ Refused to Report (g)	147	
Sub-total (Sum a+b1+b2+c+d+e+f+g)	5,780	
By Hispanic/Latino Identity		
Hispanic/Latino (c1)	91	
Non-Hispanic/Latino (c2)	5,689	
Sub-total (Sum c1 + c2)	5,780	
Unreported / Refused to Report Race and Ethnicity (h)	17	
Total (i)	5,797	65.5%

* % shown are rounded to the .1% level for table display purposes; calculations are made using % to 8 decimal places

** % by race are low estimates, not adjusted at the grantee level for samples with zero patients in racial categories.

TABLE 7 - Health Outcomes and Disparities - 2009
State - Universal - 6 Grantees

SECTION C: DIABETES			
Patients 18 to 75 diagnosed with Type I or Type II diabetes: Most recent test results			
	Total patients with diabetes	Estimated % Patients with Hba1c <= 9%	Estimated % Patients with Hba1c < 7%
By Race			
Asian (a)	17		
Native Hawaiian (b1)	0		
Pacific Islander (b2)	5		
Black/ African American (c)	56		
American Indian/ Alaska Native (d)	397		
White (e)	1,745		
More than one race (f)	31		
Race Unreported/ Refused to Report (g)	109		
Sub-total (Sum a+b1+b2+c+d+e+f+g)	2,360		
By Hispanic/Latino Identity			
Hispanic/Latino (c1)	61		
Non-Hispanic/Latino (c2)	2,299		
Sub-total (Sum c1 + c2)	2,360		
Unreported / Refused to Report Race and Ethnicity (h)	0		
Total (i)	2,360	73.5%	36.3%

* % shown are rounded to the .1% level for table display purposes; calculations are made using % to 8 decimal places

** % by race are low estimates, not adjusted at the grantee level for samples with zero patients in racial categories.

TABLE 8A - Financial Costs - 2009
State - Universal - 6 Grantees

	Accrued Cost (a)	Allocation of Facility and Administration (b)	Total Cost After Allocation of Facility and Administration (c)
Financial Costs for Medical Care			
1. Medical Staff	9,960,278	4,727,476	14,687,754
2. Lab and X-ray	2,178,825	929,874	3,108,699
3. Medical/Other Direct	2,459,980	1,178,424	3,638,404
4. Total Medical Care Services (Sum lines 1-3)	14,599,083	6,835,774	21,434,857
Financial Costs for Other Clinical Services			
5. Dental	3,271,328	1,301,710	4,573,038
6. Mental Health	118,418	58,206	176,624
7. Substance Abuse	0	0	0
8a. Pharmacy not including pharmaceuticals	107,617	54,743	162,360
8b. Pharmaceuticals	436,484		436,484
9. Other Professional	0	0	0
10. Total Other Clinical Services (Sum lines 5-9)	3,933,847	1,414,659	5,348,506
Financial Costs of Enabling and Other Program Related Services			
11a. Case Management	277,399		277,399
11b. Transportation	20,202		20,202
11c. Outreach	210,973		210,973
11d. Patient and Community Education	338,198		338,198
11e. Eligibility Assistance	136,283		136,283
11f. Interpretation Services	164,677		164,677
11g. Other Enabling Services	0		0
11. Total Enabling Services Cost (Sum lines 11a-11g)	1,147,732	415,930	1,563,662
12. Other Related Services	485,307	0	485,307
13. Total Enabling and Other Services (Sum lines 11-12)	1,633,039	415,930	2,048,969
Overhead and Totals			
14. Facility	1,544,127		
15. Administration	7,122,236		
16. Total Overhead (Sum lines 14-15)	8,666,363		
17. Total Accrued Costs (Sum lines 4+10+13+16)	28,832,332		28,832,332
18. Value of Donated Facilities, Services and Supplies			492,059
19. Grand Total including Donations (Sum lines 17-18)			29,324,391

% may not equal 100% due to rounding

TABLE 8A - Financial Costs - 2009
State - Universal - 6 Grantees

Services		Direct Accrued Cost (a)		Cost (c)
		% of Category	% of Total	Includes Overhead** % of Total
Financial Costs for Medical Care				
1.	Medical Staff	68.2%	34.5%	50.9%
2.	Lab and X-ray	14.9%	7.6%	10.8%
3.	Medical/Other Direct	16.9%	8.5%	12.6%
4.	Total Medical Care Services (Sum lines 1-3)	100.0%	50.6%	74.3%
Financial Costs for Other Clinical Services				
5.	Dental	83.2%	11.3%	15.9%
6.	Mental Health	3.0%	0.4%	0.6%
7.	Substance Abuse	0.0%	0.0%	0.0%
8a.	Pharmacy not including pharmaceuticals	2.7%	0.4%	0.6%
8b.	Pharmaceuticals	11.1%	1.5%	1.5%
9.	Other Professional	0.0%	0.0%	0.0%
10.	Total Other Clinical Services (Sum lines 5-9)	100.0%	13.6%	18.6%
Financial Costs of Enabling and Other Program Related Services				
11a.	Case Management	17.0%	1.0%	1.0%
11b.	Transportation	1.2%	0.1%	0.1%
11c.	Outreach	12.9%	0.7%	0.7%
11d.	Patient and Community Education	20.7%	1.2%	1.2%
11e.	Eligibility Assistance	8.3%	0.5%	0.5%
11f.	Interpretation Services	10.1%	0.6%	0.6%
11g.	Other Enabling Services	0.0%	0.0%	0.0%
11.	Total Enabling Services Cost (Sum lines 11a-11g)	70.3%	4.0%	5.4%
12.	Other Related Services	29.7%	1.7%	1.7%
13.	Total Enabling and Other Services (Sum lines 11-12)	100.0%	5.7%	7.1%
Overhead and Totals				
14.	Facility	17.8%	5.4%	
15.	Administration	82.2%	24.7%	
16.	Total Overhead (Sum lines 14-15)	100.0%	30.1%	
17.	Total Accrued Costs (Sum lines 4+10+13+16)	100.0%	100.0%	100.0%
18.	Value of Donated Facilities, Services and Supplies (as % of direct costs - line 17)			1.7%

% may not equal 100% due to rounding

** Total Cost After Allocation of facility and Administration % of Total.

TABLE 9D -Patient Related Revenue (Scope of Project Only) - 2009
State - Universal - 6 Grantees

Payor Category		Charges			Collections			
		Full Charges This Period (a)	% of Payor	% of Total	Amount Collected This Period (b)	% of Payor	% of Total	% of Charges
1.	Medicaid Non-Managed Care	7,913,007	100.0%	28.8%	7,719,631	100.0%	46.0%	97.6%
2a.	Medicaid Managed Care (capitated)	0	0.0%	0.0%	0	0.0%	0.0%	-
2b.	Medicaid Managed Care (fee-for-service)	0	0.0%	0.0%	0	0.0%	0.0%	-
3.	Total Medicaid (Sum lines 1+2a+2b)	7,913,007	100.0%	28.8%	7,719,631	100.0%	46.0%	97.6%
4.	Medicare Non-Managed Care	3,324,676	100.0%	12.1%	2,318,377	100.0%	13.8%	69.7%
5a.	Medicare Managed Care (capitated)	0	0.0%	0.0%	0	0.0%	0.0%	-
5b.	Medicare Managed Care (fee-for-service)	0	0.0%	0.0%	0	0.0%	0.0%	-
6.	Total Medicare (Sum lines 4+5a+5b)	3,324,676	100.0%	12.1%	2,318,377	100.0%	13.8%	69.7%
7.	Other Public including Non-Medicaid CHIP (Non Managed Care)	242,326	100.0%	0.9%	71,299	100.0%	0.4%	29.4%
8a.	Other Public including Non-Medicaid CHIP (Managed Care Capitated)	0	0.0%	0.0%	0	0.0%	0.0%	-
8b.	Other Public including Non-Medicaid CHIP (Managed Care fee-for-service)	0	0.0%	0.0%	0	0.0%	0.0%	-
9.	Total Other Public (Sum lines 7+8a+8b)	242,326	100.0%	0.9%	71,299	100.0%	0.4%	29.4%
10.	Private Non-Managed Care	5,279,604	100.0%	19.2%	3,677,817	100.0%	21.9%	69.7%
11a.	Private Managed Care (Capitated)	0	0.0%	0.0%	0	0.0%	0.0%	-
11b.	Private Managed Care (fee-for-service)	0	0.0%	0.0%	0	0.0%	0.0%	-
12.	Total Private (Sum lines 10+11a+11b)	5,279,604	100.0%	19.2%	3,677,817	100.0%	21.9%	69.7%
13.	Self Pay	10,683,612	100.0%	38.9%	2,976,624	100.0%	17.8%	27.9%
14.	Grand Total (Sum lines 3+6+9+12+13)	27,443,225		100.0%	16,763,748		100.0%	61.1%

% may not equal 100% due to rounding

TABLE 9D -Patient Related Revenue (Scope of Project Only) - 2009
State - Universal - 6 Grantees

Payor Category	Retroactive Settlements, Receipts, and Paybacks (c)						Allowances	
	Collection of recon./wrap around Current Year (c1)	Collection of recon./wrap around Previous Years (c2)	Collection of other retroactive payments (c3)	Penalty/ Payback (c4)	Net Retros	Net Retros % of Charges	Allowances (d)	Allowances % of Charges
1. Medicaid Non-Managed Care	0	0		0	0	0.0%	576,500	7.3%
2a. Medicaid Managed Care (capitated)	0	0	0	0	0	-	0	-
2b. Medicaid Managed Care (fee-for-service)	0	0	0	0	0	-	0	-
3. Total Medicaid (Sum lines 1+2a+2b)	0	0	0	0	0	0.0%	576,500	7.3%
4. Medicare Non-Managed Care	8,716	109,768		0	118,484	3.6%	989,136	29.8%
5a. Medicare Managed Care (capitated)	0	0	0	0	0	-	0	-
5b. Medicare Managed Care (fee-for-service)	0	0	0	0	0	-	0	-
6. Total Medicare (Sum lines 4+5a+5b)	8,716	109,768	0	0	118,484	3.6%	989,136	29.8%
7. Other Public including Non-Medicaid CHIP (Non Managed Care)	0	0		0	0	0.0%	143,648	59.3%
8a. Other Public including Non-Medicaid CHIP (Managed Care Capitated)	0	0	0	0	0	-	0	-
8b. Other Public including Non-Medicaid CHIP (Managed Care fee-for-service)	0	0	0	0	0	-	0	-
9. Total Other Public (Sum lines 7+8a+8b)	0	0	0	0	0	0.0%	143,648	59.3%

% may not equal 100% due to rounding

TABLE 9D -Patient Related Revenue (Scope of Project Only) - 2009
State - Universal - 6 Grantees

Payor Category		Retroactive Settlements, Receipts, and Paybacks (c)					Allowances		
		Collection of recon./wrap around Current Year (c1)	Collection of recon./wrap around Previous Years (c2)	Collection of other retroactive payments (c3)	Penalty/ Payback (c4)	Net Retros	Net Retros % of Charges	Allowances (d)	Allowances % of Charges
10.	Private Non-Managed Care				0	0	0.0%	1,098,650	20.8%
11a.	Private Managed Care (Capitated)			0	0	0	-	0	-
11b.	Private Managed Care (fee-for-service)			0	0	0	-	0	-
12.	Total Private (Sum lines 10+11a+11b)			0	0	0	0.0%	1,098,650	20.8%
13.	Self Pay								
14.	Grand Total (Sum lines 3+6+9+12+13)	8,716	109,768	0	0	118,484	0.4%	2,807,934	10.2%
13. Self Pay		Sliding Discounts (e)				Bad Debt Write Off (f)			
		5,932,581				1,593,532			

% may not equal 100% due to rounding

TABLE 9E -Other Revenues - 2009
State - Universal - 6 Grantees

Source	Amount (a)	% Group Total
BPHC Grants (Enter Amount Drawn Down - Consistent with PMS-272)		
1a. Migrant Health Center	0	0.0%
1b. Community Health Center	7,386,117	93.2%
1c. Health Care for the Homeless	541,843	6.8%
1e. Public Housing Primary Care	0	0.0%
1g. Total Health Center Cluster (Sum lines 1a through 1e)	7,927,960	100.0%
1j. Capital Improvement Program Grants	0	0.0%
1. Total BPHC Grants (Sum lines 1g+1h+1i+1j)	7,927,960	100.0%
Other Federal Grants		
2. Ryan White Part C HIV Early Intervention	394,578	22.1%
3. Other Federal Grants	67,379	3.8%
4. American Recovery and Reinvestment Act (ARRA) New Access Point (NAP) and Increased Demand for Services (IDS)	640,579	35.9%
4a. American Recovery and Reinvestment Act (ARRA) Capital Improvement Project (CIP) and Facility Investment Program (FIP)	680,847	38.2%
5. Total Other Federal Grants (Sum Lines 2-4a)	1,783,383	100.0%
Non-Federal Grants Or Contracts		
6. State Government Grants and Contracts	427,867	27.4%
6a. State/Local Indigent Care Programs	0	0.0%
7. Local Government Grants and Contracts	788,150	50.5%
8. Foundation/Private Grants and Contracts	344,294	22.1%
9. Total Non-Federal Grants Or Contracts (Sum lines 6+6a+7+8)	1,560,311	100.0%
10. Other Revenue (Non-patient related revenue not reported elsewhere)	227,872	100.0%
11. Grand Total Revenue (Sum lines 1+5+9+10)	11,499,526	

% may not equal 100% due to rounding